

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876) | | | | | | | SERIAL NO. | FILING DATE |
|--|----------|------|------------------------|------|------------------------|------|--------------|-------------|
| | | | | | | | APPLICANT(S) | |
| | | | | | | | CLAIMS | |
| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | NO. | DEF. |
| | NO. | DEF. | NO. | DEF. | NO. | DEF. | | |
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| TOTAL NO. | 5 | | | | | | | |
| TOTAL DEF. | | | | | | | | |

FILING DATE

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-576)**

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|------|------------------------|------|------------------------|------|
| | NO. | DEF. | NO. | DEF. | NO. | DEF. |
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| TOTAL NO. | | | | | | |
| TOTAL DEF. | | | | | | |